

WOOD BADGE ASSOCIATION

Voyageurs Area Council
3877 Stebner Road
Hermantown, MN 55811

ASSOCIATION USE ONLY

Submission Date: _____

Amount: _____

Approved By: _____

Approved Date: _____

APPLICATION FOR WOOD BADGE COURSE FINANCIAL AID

Please submit this application to the Council Office no later than December 23rd, 2020.
Scholarships for this course will be limited and the amount will be no more than 1/3 of the total cost.

NAME: _____ UNIT TYPE: PACK TROOP CREW DISTRICT

ADDRESS: _____ UNIT NUMBER: _____

CITY/ZIP: _____ PHONE NUMBER: _____

REASON FOR FINANCIAL AID REQUEST:

I affirm that I have a financial need for this scholarship. I promise that I will do my best to complete all the course requirements and earn my Wood Badge beads. I understand that in the event that I am unable or unwilling to complete the practical portion of the Wood Badge training, I may be require to repay any scholarship monies received I further understand that, in the spirit of Scouting, I will be expected to do my best to help others along the Wood Badge trail by becoming an active member of the Voyageurs Area Council Wood Badge Association.

Signature: _____ Date: _____